





Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
(Column 1) (Column 2)						TY	PE		OR	SMALL	ENTITY	
FO	R	NUMBE	NUMBER FILED		NUMBER EXTRA		ΓΕ	FEE		RATE	FEE	
BA	SIC FEE				-			345.00	OR		690.00	
то	TAL CLAIMS	1	minus 2	20= *	*		9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	minus	3 = *		ХЗ	9=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT							0=		OR	+260=	260	
* If the difference in column 1 is less than zero, enter "0" in column 2									OR	TOTAL	950	
CLAIMS AS AMENDED - PART II											OTHER THAN	
(Column 1) (Column 2) (Column 3)					SMA	ALL	ENTITY	OR	SMALL	ENTITY		
AMENDMENT A	,	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA ⁻	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 28	Minus	20	= 8.	X\$	9=		ÓВ	X\$18=	144	
	Independent	* <u>5</u>	Minus	PENDENT CLAIM	= 2	X3:	9=		OR	X78=	156	
	FIRST PRESE	INTATION OF M	OCTIPLE DEI	PENDENT CLAIM	<i>γ</i> 4	+13	0=		OR	+260=		
					16 8	T(ADDIT.	OTAL		OR	TOTAL ADDIT. FEE	300	
		(Column 1)		(Column 2)	(Column 3)	ADDIT.			•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	- 30	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	=	X39	э <u> </u>		0.0	X78=		
٨	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT CLAIM		1		<u> </u>	OR	7		
						+13		_ (X)	OR	+260=		
						TO ADDIT.	TAL FEE	<u> </u>	OR	TOTAL ADDIT. FEE	<u> </u>	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΓΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	=	X39	 }=		OR	X78=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
• 1	f the entry in colu	ımn 1 is less than t	+13			OR	+260=					
**	If the "Highest Nu	mber Previously P	aid For IN TH	IS SPACE is less tha	an 20, enter "20."	, ADDIT.	FEE		OR	TOTAL ADDIT. FEE	L	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

This is for INTERNAL PT USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION	NUMBER	<u> </u>				
	Fee Cade	Total - # Claims	Number Ettm X	Fac	Fee -	Tacat
	Sm./Lg.			Sm. Entiry	Lg. Entiry	0/
Basic Filing Fee	201/101	02				69
Total Claims >20	203/103 .	20 -	x		•	
Independent Claim: >1	202/102		х			
Mult. Dep Claim Present	204/104					260
Surcharge	205/105	•				130
English Translation	139					
TOTAL FEE CALCULA	TION		·			1080
Fees due upon filing d	ne application.				•	
Total Filing Fees Due		1080				
Less Filing Fees Subm.	ined - \$				·	•
BALANCE DUE	= s <u>/</u> /	080				
Office of Initial Patent F	Examination					
FORM OIPE-RAM-01 (Rev.	. 12/97)	Figu	ire 7			